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The Medical Missionary

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THE MEDICAL MISSION SISTERS

Who they are:

The Medical Mission Sisters are a religious community devoted to the care of the sick in the missions. Some of the Sisters are doctors, nurses or pharmacists; others are engaged in secretarial, household and similar duties necessary for medical mission work.

Main Activities

Hospitals, dispensaries, home visiting, leprosaria, training native nurses, training native compounders, maternity and child welfare clinics, establishing native Medical Mission Sisterhoods.

Missions

Africa, India, Indonesia, Pakistan, Southern United States.

Houses of the Society

Motherhouse and Novitiate— 8400 Pine Road, Fox Chase, Philadelphia 11, Pa.

House of Studies—6th & Buchanan Sts., Washington 17, D. C.

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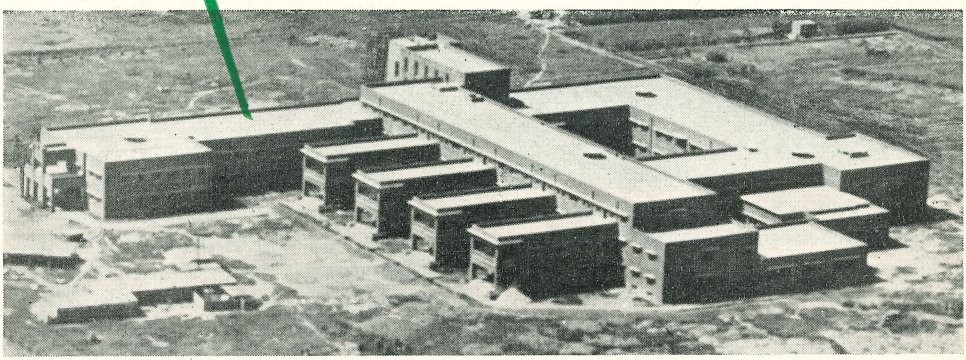
YOUR WILL . . . .

can help the Medical Mission Sisters bring health and healing to the sick and suffering of mission lands. The following approved form of bequest may be used:

"I hereby give (devise) and bequeath to the Society of Catholic Medical Missionaries (also known as the Medical Mission Sisters), an institution incorporated under the laws of the State of Maryland, and its successors forever the sum of $ ..... for its general purposes."

If you have already made your will, it is not necessary to make a new one. It is sufficient that a codicil be added, using the above form.

GRAND OPENING



New Holy Family Hospital, Rawalpindi, Pakistan *March 25, 1950*

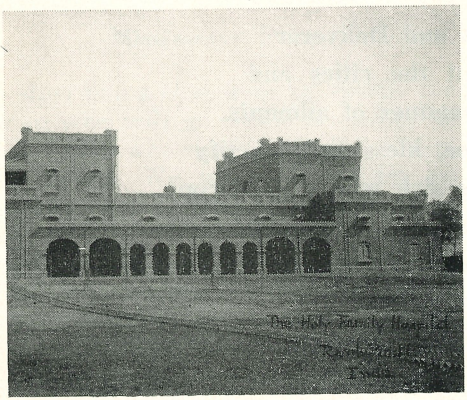
Lord Jesus Christ, the Comfort and Deliverer in our afflictions, going about the cities and towns, thou didst heal all manner of ailments. Do thou, we beseech thee, bless and sanctify this institution, that the sick who will be confined herein, freed from their illness and restored in body and mind, may rightfully choose to glorify thy power forever . . .

BLESSING OF A HOSPITAL.

"This hospital is destined to be the greatest means of making the Name of Jesus shine through all of Pakistan." *Bishop Nicholas Hettinga*

The Mohammedan General Sums It Up

St. Catherine's Hospital, 1911
16 beds. Franciscan Missionaries of Mary did the nursing.



Holy Family Hospital,
Rawalpindi, 1928, 30 beds.

This beautiful hospital which we have all gathered to see opened, is the direct descendant of a very unpretentious women's hospital that was started in Lalkurti Bazaar in 1910 under the name of St. Catherine's Hospital. Dr. Dengel became the physician-in-charge of this hospital in 1920.

In Rawalpindi the present Holy Family Hospital on Murree Road was started in 1928 with 40 beds, and was gradually enlarged. The selfless devotion of the staff made it a popular institution, to which thousands of disease-stricken women and children and maternity cases flocked. Every available space was utilized to meet this ever increasing demand for admission.

While the Second World War was busy destroying human lives and property, the plans to build this beautiful hospital were completed. It was a colossal venture to start building at a time when material was scarce, people's pockets were depleted and everything was in a state of flux, but with that wonderful faith which characterizes the members of this great movement and the righteousness of purpose they went ahead and in 1946 laid the foundation of this noble edifice of 350 beds expandable to 500. All honor and glory to them.

I want you now to visualize what the presence of this fine hospital in Rawalpindi means to you and to us all. Here is a beautiful building standing in spacious grounds that will be a joy to behold and a matter of pride

Front View of Administration Wing, Holy Family Hospital, Rawalpindi

to show. It will fill in a great hiatus in the provision of adequate medical care not only to the inhabitants of this important city but to the whole of Northern Pakistan. But to my way of thinking, it is a comparatively insignificant advantage, for, if the money is forthcoming, it is an easy matter to join brick to brick in a stately edifice but what is difficult is to find a market in which to buy the precious spirit which one associates with the medical profession at its highest and with lovers of God and His creatures.

This spirit you will find here in abundance. Imbued with this spirit the hands of the doctors and the nurses get the right guidance, and the medicine they administer gets charged with remarkable potency. Bereft of this spirit, a highly sacred calling such as ours becomes a sordid business that regards the fellow creatures as so many tools of trade, barters away the birthright of a noble heritage, traduces the physician's well deserved title of the friend of man and falsifies the best traditions of an ancient and honorable guild.

Here again you will find a centre for training nurses—so very essential in the task of alleviation of human suffering and yet so conspicuous by

Breaking of Ground for new Hospital, March 25, 1946. Mother Dengel with shovel.

Native Nurse in training. Holy Family Hospital.

Sister Alma, M. D. with two grateful Mohammedan patients.

their absence in Pakistan. Here they will be trained in accordance with high moral standards under liberty but not license and in an atmosphere charged with the highest mission of this life—that of nursing God's poor and afflicted.

And as I look over the hills—not very high hills at that—I see this hospital in not too far a distance either—forming part of a Medical College—run by the Civil, or quite likely, by the Military and supplying the most precious clinical material for the teaching institutions to turn out more doctors with sound knowledge of human diseases and their treatment, and richly endowed with the finer fruits of the mind devoted to Science and Service of Humanity . . .

I am not going to fall a prey to the temptation of singling out names to whose inspiration and labour this hospital owes its coming into being. It would be invidious. All I know is that Dr. Lalinsky (Sr. M. Alma) has worked here for 13 years and thousands of grateful patients take her name with reverence and gratitude; Sr. Alma Julia has worked for 12 years to bring the building to this present stage and I have personally experienced the impact of her dynamic personality; and Mian Abdul Aziz in directing the construction of the hospital has worked untiringly.

May this noble edifice endure and prosper; may it ever remain a haven of hope for the sick and the afflicted; may its workers continue to get the right guidance, and may they, by their work and devotion, inspire members of this noble profession elsewhere to the practice of high ideals, is my fervent prayer. And now I have much pleasure in declaring this hospital open."

S.M.A. Faruki, Major General,
Medical Services, Pakistan Army

The Parish Says Goodbye

March 25th!—at long last has come and passed with memories which will long be remembered. The workmen and coolies have been going at a great rate for the past month, and during the last fortnight, have practically established a record for Indian efficiency! God bless them! The electricity went on for the first time at 6:00 P.M. the night before the opening. Most of the window panes went in during the last 48 hours, and we had the nurses as well as workmen—shining them up! The chapel still belongs to the unfinished part of the hospital, but we were able to fix it up well enough to use. The altar, which originally came from Josepur, a Catholic village, was moved from the old hospital, and placed on a 3-tier platform of bricks. With this picture, we shall now proceed with the official activities.

On Sunday, March 18th, Reverend Father Carty, our Chaplain and Pastor of the Little Church of Our Lady where we attend Mass every day, invited us to attend a tamasha prepared by his parishioners. It was really very touching to see them. They wished us Good Bye, in a very simple but delightful way. From their people, they selected a man, a woman, a boy and a girl. Each in turn representing the parish, expressed their gratitude to the sisters and wished them success in the new hospital. These speeches were then presented to the sisters on a framed scroll containing a picture of Mother Dengel and the Motherhouse chapel. The sisters were richly garlanded (with marigolds) and presented with the sum of Rupees 501. This may not sound like much, but if you could see the poverty of these people, you would realize that it has the worth of a crore of rupees. In gratitude for their gift, Sister Alma Julia had a plaque made and placed on the wall outside of one of the Clinic Rooms. True, the cheapest room was estimated at Rupees one thousand, but these people deserved a memento for their effort and generosity. As the sisters left the compound, Father Carty and all the people shouted three times: Holy Family—Hip, Hip, Hurray!

On the following Tuesday, March 20th, we were invited to a Tea and Drama by the Presentation Nuns of St. Theresa's School, the little place which directly adjoins our compound. For our benefit, they presented the Drama in English, which was really quite an accomplishment for them! The little girl who read the Farewell Address said, "You help us to break our hands and arms!" (meaning—you mend our hands and arms when broken!) They then presented Sister Jude with a 100 rupee note and a bag full of colorful needle work—at least 100 pieces—all done by the students themselves!

We then began in earnest to prepare for the big day! The ceremony had originally been planned for outside, but contrary to all expectations, we are having unique weather for March. It is usually quite hot by this date, and dry! However, this week had been *mostly* cold, and rained steadily from the 18th to the 24th (I won't even mention the amount of mud on Said pur Road!) But for-

tunately, even though the weather is still cold, Our Lady gave us beautiful sunshine on the 25th. The next cause for syncope occurred on March 23rd, when we received a telegram from Bishop Hettinga saying "Delayed—substitute Bishop of Karachi." It was really almost too awful to believe, but the trouble was this—His Excellency had gone to Kashmir with the Father General, and got snowed in! Happily however, he finally did reach Pindi just 45 minutes before the Mass was to begin! He got the first plane out of Srinagar which went to Amritsar. From there, he reached the Pakistan border *five* minutes before closing time! No one had expected him to make it.

At 9:30 A.M. the procession of Ecclesiastics started. They entered from the rear while Ecce Sacerdos was sung by the choir. The atmosphere was a glorious one. Besides the celebrant, Bishop Hettinga, (Bishop of Rawalpindi) also present were: Archbishop Mulligan of Delhi, Bishop Cialeo of Multan, Bishop Rogers of Lahore and Bishop Van Miltenburg of Karachi. They presented a striking scene with their varied colored robes. The altar was beautiful. It is of dark wood, and behind it hung a very graceful white background: flanked on all sides were lovely white blossoms. Several times at pauses during the service, it was indeed fascinating to see the birds, perched on their little holes in the unfinished wall, looking down on all the pomp and glory, as little guards of heaven. At times, they sang as though their throats would burst! The Presentation nuns from Rawalpindi were present and the Franciscan Missionaries of Mary, as well as some school children and our nurses. The Presentation Nuns very kindly donated their organ for the occasion. After Mass, the nuns were shown around the hospital, and then we began to prepare for the afternoon ceremony.

HOLY FATHER EXPRESSES PATERNAL FELICITATION OCCASION INAUGURATION NEW HOSPITAL — LOVINGLY IMPARTS SISTERS BENEFACTORS SPECIAL APOSTOLIC BLESSING—MONTINI

At 3:00 P. M. Mohammedan Major General S. M. A. Faruki, Director General Medical Services of the Pakistan Army, officially performed the opening. Guests of honor included Commander-in-Chief of the Pakistan Army, General Sir Douglas Gracey and his wife. Others were the Commissioner of Rawalpindi and his wife. About 300 people were present. Sister Alma, M. D. acted as Chairman, and called upon Bishop Hettinga to open the function with a prayer. He read a very beautiful one, asking God's Blessing on this hospital! It was then Sister's pleasure to read the telegram which we had received from the Pope through Cardinal Montini.

Sister also read the telegram from Mother Dengel. It read:

HEARTFELT CONGRATULATIONS AND BEST WISHES FOR THE OPENING OF THE NEW HOLY FAMILY HOSPITAL. WITH FERVENT PRAYERS FOR GOD'S HELP AND BLESSING FOR ALL WHO WILL SERVE AND BE CARED FOR IN IT. ON THIS OCCASION OUR THOUGHTS AND THANKS GO OUT TO DOCTOR

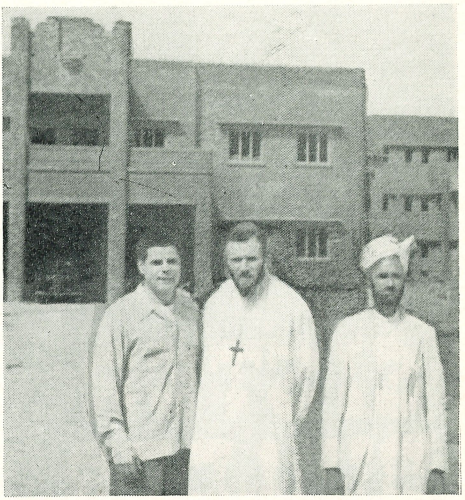
AGNES McLAREN AND MONSIGNOR WAGNER THE ORIGINAL FOUNDERS OF THE RAWALPINDI MEDICAL MISSION AND TO ALL FRIENDS AND BENEFACTORS ESPECIALLY ALSO THE PAKISTAN GOVT. WHICH CONTRIBUTED SO GENEROUSLY TO THE BUILDING. GREETINGS TO THE BISHOP GENERAL FARUKI ALL GUESTS AND OUR SISTERS AND STAFF. — MOTHER DENGEL.

Following this, Sister Alma Julia was called upon to give an address. Hers was one of thanks of course to all our benefactors and friends and workmen.

General Faruki was then called upon to open the Hospital. A tour of the building was made, and terminated back on the first floor where tea was served in two of the large wards.

During this time, the Military Band, which had come from Lahore for the occasion, performed magnanimously—just outside the hospital, in view of these wards! There were about thirty men, using only bagpipes and drums. They were colorfully dressed in pugris and sort of dark red capes, which hung over one shoulder only! The band leader was swinging his baton high into the air, and catching it with the greatest of ease! The drummers were crossing their arms, and twirling the drumsticks with gorgeous rhythm! Undoubtedly, they added a finality to the occasion which could not have been accomplished by anything else.

The following day, Sunday, was Open House Day for the Public from 10-12:00 A.M. and 2-5:00 P.M. We feel we can all utter a fervent note of thanksgiving to God and to those who planned the affair for the smoothness with which everything functioned.



His Ex. Bishop Hettinga with Lt. Guida, U. S. A., (left) at New Holy Family Hospital, Rawalpindi

His Lordship, Bishop Hettinga when called upon to speak paid a tribute to womanhood in these words: "Womanhood, Sisterhood, which remains so much behind the scenes in this country, was and is, the big builder of this Hospital. This building stands as a marvelous example of the courage and daring of women."

In that new Holy Family Hospital is a piece of world history—its grand plan, the cooperation received in this new country. I can truly say for the whole Church in this country, the building was providential. The difficulties have been terrific, but also help has been tremendous. (Bishop Hettinga of Rawalpindi)

O Holy Spirit, Spirit of Truth, come into our hearts, shed the brightness of Thy light on all nations, that they may be one in Faith and pleasing to Thee.

Sister Alma Julia, the Sister Builder speaks.

Twelve years ago Sister Alma Julia went to India as a pharmacist and medical technician for Holy Family Hospital in Rawalpindi. By 1946 the Hospital had grown far too small and Sister Alma Julia became the "Sister Builder" of the new 350-bed Holy Family Hospital. Sister had never built anything before but she set about raising money, getting permits, buying materials, hiring workmen. Building operations had hardly begun when India declared her Independence and thousands of homeless sick refugees flooded Rawalpindi. The Sikh contractor had to flee; Sister took over his job. Plans were lost; Sister made new ones. Brick by brick, in spite of civil war, riots, famine, and fire the Sister builder persevered. The story of the building of the hospital is an exciting drama in itself—Here is Sister Alma Julia's simple address of thanks to all on the occasion of the opening.

There is one cause of thankfulness that keeps coming to my mind, today. It is this: that we are living in a country—an Islamic Democracy, or whatever it is called—where we, a group of Christian women, from Foreign Lands, can buy a piece of land and build a hospital and live here according to our way of life.

That is a thing, unfortunately, which cannot happen in a large part of the world today.

This Government, not only gives us this freedom of action, not only tolerates us, but even encourages us and gives us financial and other aid. As long as Pakistan continues in this democratic spirit we will feel secure and at peace here and continue in our way of life.

Notice that I use the words "our way of life." People so often question us about that. Our way of life is simply this: to live a Christian life in its greater perfection. In the Gospels we find all the commandments reduced to two: First, to love God, second, to love one's neighbor. Some say the law can be reduced to one commandment: to love God. Because

if one loves God then one will love his neighbor. And who is my neighbor? Everyone.

So our way of life is simply to show our love of God by serving our neighbor. There are many ways in which we can serve our neighbor: to teach the ignorant; to care for the orphans and the aged; to heal the sick. Our particular community, as its name implies, has chosen the medical field. More specifically, we have dedicated our lives to the care of the sick in those countries where it is most needed, especially the care of women and children.

We do not want merely to care for the sick, our aim is to do so in the most up-to-date and scientific manner.

Also our medical work does not mean only taking care of the sick ourselves. Our work would then be limited by the number of Sisters and doctors we could bring from abroad. Therefore we have training schools where our Pakistani girls can learn nursing, midwifery, and be compounders, technicians, or learn other branches of medical science. Thus our efforts will be multiplied as the years go by and an increasingly large number of girls be graduated. Now that we have more room to house them, another reason for thanks.

There is another item foremost in my mind for which I give thanks to God — a most important item. For nearly four years we have been building this hospital. During that time we averaged about 200 workmen, mostly coolies. During all that time we have had no fatal accidents amongst these workmen. I have been told that such a record is not common with so large a construction job.

I am thankful for the loyal workmen I have had.

The rest of our thanks include the

The original contractors, Abdul Aziz (right) and Sr. Alma Julia

numerous groups and individuals who have made this opening day possible by their financial and other aid. The Military and Civil bodies, the clubs and churches and factories, a list too long to enumerate here.

Especial thanks are due to the Defense Department of the Military and the Engineering Department. The one for their financial aid, the other for their technical advice and engineering aid. Without the Engineering Department of the Military, the roof would not be on the hospital today, I'm afraid. They helped me get materials from Government and military disposals when these were most difficult to get. They helped with machinery and equipment, such as testing our well, etc. I'm sure I tried the patience of both military departments many times.

In conclusion I want to thank you, the representatives of all these groups I have mentioned, for coming here today to help us celebrate this occasion. This is a time when we want our friends to see what their help and encouragement have accomplished.

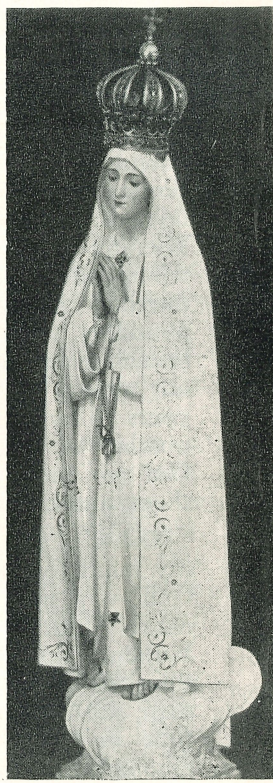
I can best conclude with a sentence we say in our prayers several times a day, "Vouchsafe, O Lord, for Thy Name's sake, to reward with eternal life all those who do us good."

The Pilgrim Virgin Visits Us

KARACHI

Sister Constance and Sister Therese were still here when the statue arrived at the airport, so they went out to greet Our Lady. The statue was taken to all the churches and convents in Karachi and Hyderabad. It was brought here on April 26th, escorted by the Catholic scouts' band and the Legion of Mary. All of our staff—Sisters, nurses and servants including the mihtranis (sweepers) met the statue at the gate. The mihtranis were at first hesitant, from religious scruples or because they are low caste, but we urged them to come, saying that Mariyam loved the poor.

Our choir sang the Magnificat until the statue was in the chapel. A Parsi boy accompanied the choir with a violin. We had taken the priedieus from the chapel so were able to get the nurses, the sisters, one Muslim girl, and the two old ladies living on our compound into the chapel. The Muslim girl, who has been suffering from arthritis for many years, had gone to St. Patrick's church in the morning for the blessing of the sick, but was too late. We squeezed her in, very close to the statue. She recited the prayers to Our Lady of Fatima along with the crowd. Many people were in the hall.



Father led the rosary, all fifteen decades. Between each five decades we sang two stanzas of the Lourdes "Ave." After Benediction, the veneration of the statue started. All kissed it, irrespective of creed: Protestants, Muslims, Parsis. At all the churches, it was noted that many non-Catholics were present.

One Parsi man and his wife stayed in the chapel praying while the veneration was going on. This couple had two babies and both died. They are praying that God will give them a healthy child.

Certainly Our Lady's statue attracted thousands and many, many, non-Catholics. This is significant when one considers that the Muslims decry the veneration of statues.

Sister M. Dolores, R. N.

MYMENSINGH

"Our Lady of Fatima arrived here March 23rd. Two thousand Garos came instead of the expected 600. We all marched down to the station in procession reciting the rosary and singing. The Bishop and 12 Brothers and Priests came with the statue from Dacca. The Bishop spoke over a loud speaker at the station and explained about the statue. There were as many Muslims watching the spectacle as we were in the procession. We processed back with our Lady on a throne in the jeep. Then things really started—all night veneration, Pontifical Mass, processions and at 1:30 P.M. on the 24th, the statue came to the hospital and visited the sick Sisters and Priests (seven in all). We all had a chance to be right with the statue as the Father-in-charge took Her to each Sister and Priest separately. Sr. Louise helped to sing the Pontifical Mass and Sr. Bernard had the honor of carrying Our Lady from her shrine to her place in back of the altar for the Bishop's Mass.

Sr. M. Benedict, M.D.

MALABAR

About noon we left by boat for Alleppey to welcome the "Pilgrim Virgin," Our Lady of Fatima, to the Malabar Coast.

Our little group was escorted to the rear of the boat and we managed to stand just behind the niche on which the Statue was to be placed. When Our Lady's cortege came, she was accompanied by an immense crowd and, of course, a band. I peeked around the corner of the niche to see the Statue when the priest who was carrying it looked right at me. Suddenly he said, "Come here, Sister, to the front."

Thinking he wanted to favor my white skin, I politely said, "No thank you, Father."

Once more he tried, then the third time he added, "I want someone to hold Our Lady for the journey."

In a second, I was in the front, and said, "With pleasure, Father." Sr. Luke was put on the right and I to the left and the other five of us were also invited to help. Together, we, the Mary Giri Medical Mission Sisters, formed Our Lady's Bodyguard for three full hours. What a privilege this was we only fully realized when we heard that no one is allowed to touch the Statue—and there we were actually appointed to hold it!

Sr. M. Augustine

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India's Social Problems

Wherever there is a society there are social problems. India's vast population and her time-lag behind other nations, make her problems more acute.

Having achieved political freedom for this nation of 350,000,000 Nehru and his government now hope to raise the economic level that has prevailed for over two centuries. In this they are handicapped by several social problems, most of which are deep rooted in India's traditional way of life, and some of which are traceable to the influence of India's oldest religion, Hinduism.

Caste or social distinction is the basis of our biggest problems. This evil, however, is not India's monopoly. Lord Hibrow does not condescend to speak with Gus the milkman in the London tram, nor does Mrs. Archibald Simpson of Chicago let her boy play with the grocer's daughter, for the same reason that the lawyer's daughter does not go to the movies with the rickshaw man in Bombay.

Caste assigns a man his job before he is born. The Doms are traditionally sweepers and scavengers, the Chamars are shoemakers, the Dhobis wash clothes, the Gwalas mind the village cattle belonging to the rich merchant or the poor farmer, the Kyasths are clerks, the Marwaris are brokers and merchants. In the old village society of another age, this system had its advantages. Through caste each community was assured of sufficient services to make it self-sufficient and secure.

In a dynamic world a stable society can be a stagnant one, and that's what happened to India. The old order has become inefficient and its workers poorer. The village shoemaker cannot make as good nor as cheap a product as the machine; the herdsmen cannot improve the breed of cattle they do not own; and the small farmer lacks the resources and initiative to experiment with new crops or better methods. Worse than these limitations imposed by caste is the loss to the nation of the talents inherent in youth, the genius for art, invention, adventure, and commerce which is sacrificed that a common occupation be continued by tradition.

Caste in India is directly related to Hinduism. The more orthodox say that the people of India are descended from the cow. How, they do not say. All real Hindus believe in the transmigrations and rebirths of the soul progressively from the low state of a scavenger to the highest state of a Brahmin. His progression or retrogression is according to a law of punishment and reward based upon the manner in which each fulfills the obligations of his caste. Obviously if one neglects his traditional occupation, he may find himself reborn in an uncomfortably low state.

This ancient mentality is changing, however. Even the limited industrialization we now have has modified the attitude towards traditional occupations. All castes and no castes are to be found at the same lathes and looms where the premium is placed upon efficiency, not heredity. Transport, the public utilities, the army

and navy, aviation, etc. are speeding up the breakdown of caste.

A reliable Indian authority has passed this verdict on caste: "The caste system has come to be an outworn order of which the evils are dominating over the merits. It has become a social and economic nuisance which is retarding the political and economic progress of the country." The most lauded man in the Constituent Assembly at Delhi on India's first Independence Day was the man who did most in drafting the new Constitution, Dr. Bhimrao Ambedkar. Born an outcaste, he suffered great insults and physical hardships to gain an education. The honors now given him are a hopeful sign that India may some day wholly break from the bonds of caste.

Coupled with caste is India's attitude towards marriage and the family. It is a caste obligation to marry within the same caste. For this reason the rich Marwari's son does not court the farmer's beautiful daughter. In fact, there is no courting done,—until after marriage.

In the western world marriage is regarded as a "private affair," forgetting that the union serves a social as well as a personal function. India lays stress on the social. Its purpose is to continue the race and the caste occupation of the group; therefore the parents choose the partner, bring the new wife into the family, and all members of the family share alike in the same fortune.

Although parents generally have the welfare of their children at heart in contracting their life partners, it not infrequently happens that the children are sacrificed to an unsuitable partner for some social or financial gain of the parents. Moreover, where the joint family system prevails, all the sons inherit equally, regardless of merit, and in the case of landowners every plot is equally divided among the sons until the units become economically untenable. All in all, some aspects of Indian marriage customs need amendment.

Illiteracy ranks high as a social problem. Education is certainly not the panacea of social problems unless joined to good moral training. At present only 13% of India's people get beyond the village barrier of ignorance. The State is anxious to provide schools for all children, but lacks the funds and teachers to achieve much in the immediate future.

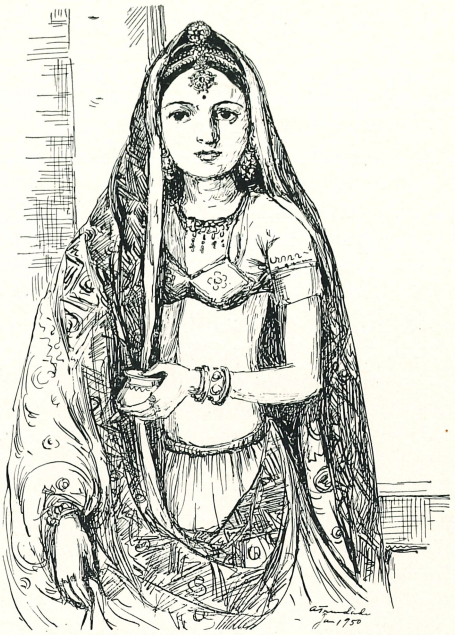
Were India self-sufficient in feeding her millions, the general health would be greatly improved. The most productive years of a man's life are lost to the country because the average life-expectancy is only 27 years. This high rate of mortality is caused by numerous epidemics that might be resisted by a well-fed people. Typhoid, plague, cholera, and small-pox sweep unchecked over large districts annually because India lacks sufficient medical personnel to halt them. Her 47,400 doctors should be four times that number; the 7,000 nurses should number 740,000; and she lacks 91,000 dentists. Health is a physical problem, but its effects make it a dominant social problem for India.

In the fields of education and medical care, India is debtor to the Indian and foreign Catholic priests and Sisters This silent army of unselfish missionaries is patiently, progressively, helping India overcome her social problems to make real the Kingdom of Christ on earth, and to make India more like the Kingdom of God.

John J. Barrett, S. J.
Patna, India

To know how to bear life! It is the first penance of every Christian, the first condition and first means of sanctity and justification. ***Pius XII.***

MEET
THE PEOPLE



A. Trindade

THE HEADLIGHT LADIES

Sister Alice was intrigued. The veiled form opposite her had not moved since the group of women had dashed noisily onto the train two stations ago. The small compartment was overcrowded and packed to the doors.

As Sister Alice glanced again at the still form, she saw the edge of the sari lift and found herself gazing into two tragic dark eyes. They were the property of a very young and lovely girl. She was obviously a bride —a very rich one!

On her forehead was a great cluster of priceless jewels, consisting of an enormous emerald surrounded by rows of diamonds, pearls, and rubies. Her ears were weighed down with earrings; a glittering nose ring was stuck in the side of her beautiful nose; her slender fingers were heavy with rings. Her dainty arms and feet looked as though they could hardly support the bracelets and anklets with which they were adorned.

As Sister Alice gazed, entranced at the huge jewels on the girl's forehead, the thought suddenly struck her, "Why, it's a headlight!" The older women too, were beginning to unveil and to disclose a whole series of "headlights," one on each forehead. It looked like a convention of ear, nose, and throat specialists!

"Ap kahan jati hain (Where are you going)?" inquired Sister Alice.

They were taking a new daughter-in-law home. They were all returning from the wedding ceremony. Had Sister Alice's honor seen the beautifully dressed young man who came to the compartment just now?

Indeed Sister Alice had. It would have been difficult to miss such a rainbow!

The women were all most enthusiastic. The bridegroom's family was a good one, they were well-to-do, the boy was fair-skinned and young, he would inherit a good business from his father. What more could be asked of any groom!

"Ap usko pasand karti hain (Do you like him)?" asked Sister Alice turning to the bride.

The tears that were very near the surface overflowed: "I don't know him. It is all new and I'm going to a strange place where I don't know anyone," was the sobbed response.

"Yih to kya (What is that)?" said the mother-in-law, not unkindly. "It is something we all have to put up with in life. Sab achcha hoga (All will be well)."

Resignedly the young head nodded. It was true, most of her little friends

were already married and gone to far off towns and villages. Her own kismet was good:—only she was so lonesome!

"What kind of work does your husband do?" questioned Sister Alice.

"Jewelry ka kam (He is a jeweler)," chorused the women happily. "Most of our caste, the Marwaris, are jewelers, money lenders, traders."

"Yet," said Sister Alice to herself, "they must be most frugal; here they are, traveling third class with the poorest of the poor, including me.

"Where do the Marwaris originally come from?" asked Sister Alice.

"From Marwar, a State in Rajputana," answered a bejeweled old grandmother. "There are many of us in Bombay now, but there are Marwaris living in every part of India."

"Are any of you Christians?" continued Sister Alice.

"No, but we like the Christians very much," interjected another woman eagerly. "They have a wonderful hospital in Rawalpindi. They saved my mother's life.

"Isn't that rather far from your home?" returned Sister Alice, in surprise.

"Oh, not more than twenty-four hours journey," was the casual response. "We don't mind how far we go for such good treatment, and the Sisters there are so nice."

"I'm so glad that we were able to help you," said Sister Alice.

"Oh," cried the women, "are you a 'Holi Hospital' Sister? Are you from Pindi or Patna?"

"Well, I just came from Patna but I am on my way to Mandar now," replied Sister Alice. "Here is my stop!"

"Good-bye Sister" they all called after her, "it was so nice riding with you—you are so like us!"

S. M. L.

MAY THEY REST IN PEACE

Very Reverend Joseph Rutten, former superior general of the Missionaries of the Immaculate Heart of Mary (Scheut) Fathers, and one of the greatest missioners the Catholic Church has had in China in the last 200 years died recently at Pau, France.

Father Rutten was responsible for a survey of medical needs of China. The results of the research were incorporated in the famous letter on the Medical Needs of China, published by His Excellency Marius Zanin, Apostolic Delegate to China in 1936. Mother Dengel had the privilege of meeting Father Rutten who, knowing the tremendous medical needs in the missions, encouraged the Medical Mission Movement very much.

Rev. Robert J. Carse, Peoria, Ill.
Rev. Michael J. Manning, North Cambridge, Mass.
Rev. Mother Valeria Bielak, Superior General of Miss., Srs. of St. Peter Claver, Rome, Italy.
Sister Mary Euphrasia Fanning, R. S. M., Hartford, Conn.
Sister Mary Eugene Gallagher, R. G. S., Phila., Pa.
Sister Mary Francis MacDonald, O. S. C., Phila., Pa.
Sister Mary Justinian, Manning, S. B. S., Cornwells Heights, Pa.
Sister Mary Jane Chantal Murphy, C. S. C., Washington, D. C.
Miss B. Brosnan, New York, N. Y.
Mr. Tito DiGiorgio, Phila., Pa.
(father of Sr. M. Celeste, S.C.M.M.)
Mr. Francis Fasy, Phila., Pa.
Mr. Charles Flieger, Brooklyn, N. Y.
(Father of Sr. Laetitia, S.C.M.M.)
Miss Mary J. Fitzgerald, Yonkers, N. Y.
Mrs. John Getz, Sr., Phila., Pa.
Dr. Clarence Howley, New York, N. Y.
Miss Winnifrede A. McDonald, Pittsburgh, Pa.
Miss Margaret McMenamin, Phila., Pa.
Miss Nicolina Nastasi, Beaumont, Texas
Mr. John F. Roach, Rutherford, N. J.

Chits from India

Mussoorie Not Missouri

When St. Mary's Hospital in Mussoorie, India, opened its doors on March 17th, the 12th mission of the Society was inaugurated. Located high up in the Himalayan Mountains near Delhi, India's capital city, Mussoorie is known as the "Queen of the hill stations."

St. Mary's was formerly a private hospital under secular auspices. Four Medical Mission Sisters have been appointed to staff the small 30-bed hospital. Sr. M. Vincent, R. N. of Dublin, Ireland, the Superior, managed to have the first Mass said on St. Patrick's Day. Sr. M. Marcella Du Brul, M.D. of Cincinnati, Ohio is the doctor-in-charge. Sr. M. Thaddeus, R.N. of Tucson, Arizona, and Sr. M. Damien, R.N. of Wognum, Holland, are the other members of the staff.

Missionary Picnic

Just had a chat with Fr. Smith, the man who will go down in history as the Jesuit who spoiled our Holy Family picnic. We were all set for an outing on the Ganges; baskets packed, boat hired, hopes high, when he arrived with a perforated gastric ulcer! So we spent Sunday morning in the operating room instead of on the water. If Father hadn't been stationed here in Patna, he never would have made it in time. Says I, a picnic is a small price to pay for saving one missionary for his work. Surely, the Lord looks after His own!

Sr. M. Elise, M. D., Patna

Will He Be Surprised?

Sister Alma Julia went down to the Military Offices on business the other day. A man came up to her in the office-waiting-room and started a long tale about his wife's ills. (This, of course, is typical here—you can seldom go out that someone doesn't stop and relate "in toto" his own or his family's complaints.) After he gave Sister all the details, she suggested that he take his wife to see the doctor and described the where-abouts of our HOLY FAMILY HOSPITAL on Murree Road.

"Oh!" he replied, "I know *that* place. My wife has been there several times and is not a bit better. I'm going to take her to the NEW HOLY FAMILY HOSPITAL!"

Sr. M. Clare, R. N., Rawalpindi

A Grave Situation

We had tea in the cemetery just now, almost our only recreation space. It really is a very nice cemetery—so old it doesn't feel like fresh sorrow anymore; just mellow, peaceful, orderly and rather faded. One tombstone had four tiny infant graves around it; another is of a bride poisoned on her wedding night. A section belonging to Sisters who were in Patna years and years ago, looks more like a dormitory than a graveyard with its neat little row of uniform markers. People are always laughing at us for having meals and sleeping in the cemetery, but we don't mind it at all—and neither do the dead! Sr. M. Elise, M. D., Patna

Child of Destiny — A Book Review

The Life Story of the First Woman Doctor, by Ishbel Ross. Harper & Brothers, N. Y. (1949, 298 pgs. $3.50)

The survival of the infant Elizabeth Blackwell in 1821, when all expected that she would die, was the first of innumerable battles she was to fight and win before becoming the first woman doctor in the United States and Great Britain and one of the most progressive women of her era.

Her story as told by Ishbel Ross vividly presents the background, education, temperament and strength of will which permitted her to defy the prejudice of her age and to do her large part as a reformer and pacemaker in the struggle for the educational privileges of women—those privileges which women take so much for granted, now that they are readily admitted on an equal basis with men to almost any professional school or field of endeavour.

She was the daughter of a deeply religious Englishman, Samuel Blackwell, who championed among his many causes, the rights of man, abolition of slavery, temperance, and equal rights for men and women as well as for all classes and creeds. Long before Elizabeth was given the idea of becoming a doctor by a friend who was dying of cancer, she had put her energies behind several reform movements, the chief among these being, the abolition of Slavery.

Though naturally a little repulsed by the idea of becoming a doctor, she overcame her repugnance seeing in this a tremendous field of endeavour for the betterment of her fellow man. To her, medicine opened vistas in which women could be of incalculable importance in directly helping others, in teaching personal hygiene, raising moral standards, and promoting preventive medicine.

From the moment that her decision was made, Elizabeth Blackwell never veered from it despite any pressure or discouragement. She taught school to raise sufficient funds for her medical education and after having applied to twenty-nine medical schools she was to be accepted by only one, Geneva College in New York State, and that only as a prank of the student body, to whom the question was referred.

Graduation did not put an end to her difficulties. The story of her quest for the practical medical experience which she knew to be indispensable, if she were to be the superior doctor necessary, is an intriguing one, relating the rebuffs and trials she endured in the U. S., England, and Paris.

Through it all she maintained her composure, winning the respect of her teachers and fellow workers by hard work, and a tremendous amount of common sense. Her plan of approach throughout was to prove that there was a real place in medicine for women. There was nothing fanatical about her. This was not an anti-man campaign. She stated her own position well when she said that education had "Nothing to do with woman's rights or man's rights, but only with the development of the human soul and body." She embodied her belief in the final outcome in this prediction: "Men and women will be valuable friends in medicine."

Though Elizabeth did, as did so many of her contemporaries, move from one religious cult to another, her belief was always a motivating force.

Sr. M. Samuel

Dear St. Joseph:

Remember last month, I described our over-crowded chapel to you? Well, in August, St. Joseph, less than three months away a new group of postulants will be joining us. I am afraid that the above scene will then come to pass, unless . . . We need the postulants. Don't think we will turn any of them away. We have too much faith in you for that.

Thanks very much for the help you sent already, St. Joseph. You really have some good friends, but you must have many more. Please ask them to prove it now by helping us. Confidently yours,

Anna Dengel

Are You a Friend of St. Joseph?

Dear Mother Dengel, here is my contribution $_____ towards your new chapel.

Name _____

Address _____

City _____ Zone ____ State _____